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22511 7590 01/08/2004

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Brenda C. McFadden	(Depositor's name)
<i>Brenda C. McFadden</i>	(Signature)
March 26, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/033,188	10/25/2001	Mani Soma	02008.070001; AD-0318US	7329

TITLE OF INVENTION: CLOCK SKEW MEASURING APPARATUS AND METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional.	NO	\$1330	\$300	\$1630	04/08/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
DEB, ANJAN K	2858	324-076740

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 OSHA NOVAK & MAY L.L.P.  
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Advantest Corporation

Tokyo JAPAN 179-0071

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee
- ☒ Advance Order - # of Copies 4

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- ☒ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
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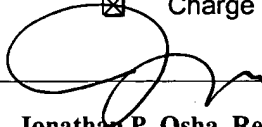
Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) <i>[Signature]</i>	(Date) 3/26/04
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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.	
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03/30/2004 EFL0RES1 00000053 10033188

01 FC:1501	1330.00 OP
02 FC:1504	300.00 OP
03 FC:8001	12.00 OP

TRANSMIT THIS FORM WITH FEE(S)

<b>TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity)</b> (37 C.F.R. 1.311f)			Docket No. 02008.070001	
Applicant(s): Mani SOMA et al.				
Serial No. 10/033,188	Filing Date 10/25/2001	Examiner Anjan K. Deb	Group Art Unit 2858	Confirmation No. 7329
Invention: <b>CLOCK SKEW MEASURING APPARATUS AND METHOD</b>				
<b>Mail Stop Issue Fee</b> <b>TO THE COMMISSIONER FOR PATENTS</b> <b>P.O. Box 1450</b> <b>Alexandria, VA 22313-1450</b>				
Transmitted herewith are the following for the above-identified application.				
<input checked="" type="checkbox"/> Issue Fee Transmittal Form PTOL-85				
<input checked="" type="checkbox"/> Utility Fee: \$ 1330.00 <input type="checkbox"/> Design Fee: _____ <input type="checkbox"/> Plant Fee: _____				
<input checked="" type="checkbox"/> Publication Fee: \$ 300.00				
<input checked="" type="checkbox"/> A check in the amount of \$1,642.00 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 50-0591 as described below.				
<input type="checkbox"/> Charge the amount of _____				
<input checked="" type="checkbox"/> Credit any overpayment.				
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 Signature Jonathan P. Osha, Reg. No. 33,986 OSHA NOVAK & MAY L.L.P. 1221 McKinney, Suite 2800 Houston, Texas 77010 Telephone: (713) 228-8600 Facsimile: (713) 228-8778			Dated: 3/26/04	
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